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AF/3743

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	10/068,170
Filing Date	February 4, 2002
First Named Inventor	DRINAN, Darrel
Group Art Unit	
Examiner Name	
Attorney Docket Number	05693.0004.NPUS00

To: Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

I hereby apply to withdraw as attorney or agent for the above-identified patent application.

The reason for this request is: Client has requested transfer of application to new counsel.

1. ☐ The correspondence address is NOT affected by this withdrawal.

2. ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

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Place Customer Number
Bar Code Label here

<input checked="" type="checkbox"/> Firm or Individual name	Knobbe Martens Olson & Bear LLP (Attn: Mr. Thomas R. Arno)				
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☒ This request is made on behalf of myself and
☒ all the attorneys/agents of record,
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
☐ the attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

Name	Robin C. Chiang (Reg. No. 46,619)
Signature	
Date	June 14, 2004

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.